

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: Determining Redundancies in Content Object
Directories

Attorney Docket Number:: 019396-001800US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 5

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mark
Middle Name:: R.
Family Name:: Thompson
Name Suffix::
City of Residence:: Chandler
State or Province of Residence:: AZ
Country of Residence:: US
Street of Mailing Address:: 1130 West Longhorn Drive
City of Mailing Address:: Chandler
State or Province of mailing address:: AZ
Country of mailing address::
Postal or Zip Code of mailing address:: 85248

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Nathan
Middle Name:: F.
Family Name:: Raciborski
Name Suffix::
City of Residence:: Jackson
State or Province of Residence:: WY
Country of Residence:: US
Street of Mailing Address:: 470 Arapaho Drive
City of Mailing Address:: Jackson
State or Province of mailing address:: WY

Country of mailing address::
Postal or Zip Code of mailing address:: 83002

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation::	Representative Number::	Representative Name::
Primary	35,809	Charles J. Kulas
Associate	39,411	William F. Vobach

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::